

# UPPER UWCHLAN TOWNSHIP APPLICATION FOR EMPLOYMENT

Each question must be answered in full. Incomplete applications will not be considered.

Upper Uwchlan Township is an equal opportunity/affirmative action employer. We are committed to providing equal employment opportunities to all team members and applicants without regard to race, religion, color, sex (including breast feeding and related medical conditions), gender, gender identity and expression, sexual orientation, national origin, ancestry, citizen status, uniform service member and veteran status, marital status, pregnancy, age, protected medical condition, genetic information, disability or any other protected status in accordance with all applicable federal, state and local laws. The information on this application is not solicited for, nor will it be used for, the purpose of unlawful discrimination.

#### **PERSONAL INFO:**

Name:Last		First	
Address:		<del> </del>	
City:	State:	Zip	Code:
Telephone:	Cell Phone:	Email:	
List the job(s) you are ap	olying for:	Date available to star	t:
First Choice:		Expected Salary: _	
Second Choice:		Expected Salary: _	
Availability: Full time	Part time:	Seasonal:	
Have you previously appl	ied to Upper Uwchlan Town	ship for employment? Yes	No
If yes, list the date(s) of p	revious applications:		
Relatives working at Upp	er Uwchlan Township:		
Are you at least 18 years	old? (If under 18, hire is sul	bject to verification of legal age	) Yes No
If hired, can you provide	proof that you are legally en	titled to work in the U.S.?	Yes No
If not, what steps must be	e taken for you to begin emp	ployment lawfully?	
Are you able to perform, v	vith or without accommodati	ons, the essential functions of	the job for
which you are applying?	Yes No		
f not, identify the essentia	ıl function(s) of the job which	h you are unable to perform wit	th or without accommo
Have you ever been conv	/icted of a criminal offense (	felony or serious misdemeanor	r)? Yes No
minor traffic infractions at pretrial or post trial divers	nd convictions for which the sion programs, any conviction	ere convicted, and disposition of record has been sealed or exp on that has been judicially dism ocurred over two years ago in a	ounged, participation i issed or ordered seal

(No applicant will be denied employment solely on the grounds of conviction of a criminal offense. The nature of the offense, dates of the offense, the surrounding circumstances, and the relevance of the offense to the positions(s) applied may, however, be considered.)

#### **EXPERIENCE & BACKGROUND**

List the training, experience, education, or any other facts which particularly qualify you for the job(s) sought including capabilities and licenses on-the-job-related equipment such as a motor vehicle or computer:			
CURRENT AND PREVIOUS EMPLOYMENT			

Please list the names of your present and previous employers in chronological order with current or last employer listed first.

Include all employers for the last 10 years or the most recent 3 employers, whichever is a longer period of time. Include part-time, seasonal and all other employment. If you need more space, use a separate sheet of paper. DO NOT ANSWER "SEE RESUME." Resumes will not be accepted in lieu of completed application.

I. Current or Last Employer		Job Title		
-				
Address. Number and Street	City		State	Zip Code
Telephone				
Number(s) Supervisor's Name		Supervisor's	Joh Title	
Reason for Leaving				
Date Hired		Last Date Employed		<u>.</u>
Describe Your Job Duties				
Starting Pay Rate		Ending Pay Rate		

II. Employer		JOD I ITIE			
Address. Number and	City		State	Zip Code	
Street	Oity				
Telephone					
Number(s) Supervisor's Name		Supervisor's	Job Title		
Oupervisor a Hairie		<u> </u>			
					_
Reason for Leaving					
Date Hired		Last Date Employed			
Describe Your Job Duties:					
Ct-diam		Ending			
Starting Pay Rate		Pay Rate			
		Job Title			
III. Employer		Job Title			
III. Employer		Job Title			
III. Employer  Address: Number and	City	Job Title	State	Zip Code	
III. Employer	City	Job Title	State	Zip Code	
III. Employer  Address: Number and	City	Job Title	State	Zip Code	
III. Employer  Address: Number and Street	City	Job Title	State	Zip Code	
Address. Number and Street  Telephone Number(s)	City			Zip Code	
Address. Number and Street  Telephone	City	Job Title  Supervisor's		Zip Code	
Address. Number and Street  Telephone Number(s)	City			Zip Code	
Address. Number and Street  Telephone Number(s) Supervisor's Name	City			Zip Code	
Address. Number and Street  Telephone Number(s)	City			Zip Code	
Address. Number and Street  Telephone Number(s) Supervisor's Name  Reason for Leaving	City	Supervisor's		Zip Code	
Address: Number and Street  Telephone Number(s) Supervisor's Name  Reason for Leaving  Date Hired	City	Supervisor's		Zip Code	
Address: Number and Street  Telephone Number(s) Supervisor's Name  Reason for Leaving  Date	City	Supervisor's		Zip Code	
Address: Number and Street  Telephone Number(s) Supervisor's Name  Reason for Leaving  Date Hired	City	Supervisor's		Zip Code	
Address: Number and Street  Telephone Number(s) Supervisor's Name  Reason for Leaving  Date Hired	City	Supervisor's		Zip Code	
Address: Number and Street  Telephone Number(s) Supervisor's Name  Reason for Leaving  Date Hired	City	Supervisor's		Zip Code	
Address: Number and Street  Telephone Number(s) Supervisor's Name  Reason for Leaving  Date Hired	City	Supervisor's		Zip Code	

Have you ever been terminated or asked to resign from any job? ☐ Yes ☐ No
If yes, please explain circumstances (use a separate sheet of paper if necessary)
May we contact your current and past employer(s)? ☐ Yes ☐ No
If no, please explain:

## **EDUCATIONAL BACKGROUND**

Education	Years Complete (Circle)	Degree Earned (Yes or No)	School Name & Location (City, State)	Course of Study	Describe Specialized Experience, Training, Skills and Extra Curricular Activities
High School	9 10 11 12				Pourities
College/ University	1 2 3 4				
Graduate/ Professional	1 2 3 4				
Trade or Correspond ence					

### OTHER RELEVANT EXPERIENCE

Describe other experience you have that is relevant to the job for which you are applying or list any job related designations, certifications or courses completed that may be applicable to the position desired
MILITARY
Have you served in the armed forces? Yes No Branch:
Duties, training while in armed forces that may contribute to your performance in the job applying for:
Have you ever been bonded? Yes No Refused a bond: Yes No
Bonded for what job:
Reason for bond refusal?
DRIVING INFORMATION (Complete only if driving is an essential function of the job for which you are applying)  Do you have a valid driver's license? Yes No  If yes, License No.: State: Expiration Date:  If you do not have a PA driver's license, why not?  Has your license ever been suspended or revoked? Yes No  If yes, explain:
Do you have personal automobile insurance? Yes No
If no, explain:
REFERENCES
List individuals (other than former employers and relatives) who have known you at least 2 years and whom we may contact:
Name:Occupation:
Address: Phone Number:
Name:Occupation:
Address:Phone Number:
Name:Occupation:
Address: Phone Number:

I understand that this employment application and any other Township documents provided during the application process are not promises of employment. I understand that if I am hired, my employment will be at-will.

I certify that the information given by me on this application and during the interview process is true and complete in all respects, and I agree that if the information is found to be false, misleading, or unsatisfactory in any respect (in the Township's judgment) I will be disqualified from consideration for employment or subject to immediate dismissal if discovered after I am hired.

I understand this application will be considered active for a maximum of 180 days. If I wish to be considered for employment after that time, I understand that I must reapply. I further understand that separate applications are required for each position for which I wish to be considered.

Signature	Date